Submit 3 Copies to Appropriate District Office

APPROVED BY _____

CONDITIONS OF APPROVAL, IF ANY:

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office				
DISTRICT I P.O. Box 1980, Hobbs NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO. 30-025-12491		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease STATE FEE X	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No.	FEE (A)
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)			7. Lease Name or Unit Agreement Name N. HOBBS (G/SA) UNIT	
1. Type of Well: OIL GAS WELL X WELL] OTHER		N. Hobbe (dyex) Gran	
2. Name of Operator Shell Western E&P Inc.			8. Well No. 341	
3. Address of Operator P.O. Box 576, Houston, TX	(77001 (WCK 5237)		9. Pool name or Wildcat HOBBS (G/SA)	
4. Well Location Unit Letter 0 : 330	Feet From The SOUTH	Line and 2310	Feet From The EAST	Line
Section 19	Township 18S	Range 38E	NMPM LEA	County
		whether DF, RKB, RT, GR, e		
		1	, Report, or Other Data	
NOTICE OF I	NTENTION TO:	SUI	BSEQUENT REPORT OF	:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS		GIOPNS. PLUGIAND ABANDON	MENT [
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB	
OTHER:		OTHER: SET CIB	P FOR WSO	
12. Describe Proposed or Completed Opwork) SEE RULE 1103.	perations (Clearly state all pertin	nent details, and give pertine	ent dates, including estimated date of st	arting any
7-27 TO 7-28-94:				
POH W/PROD EQMT. SET CIB	P @ 4185' & CAPPED W/1	O'CMT. INST PROD EQI	MT & RTP.	
I hereby certify that the information above is	, ,	owledge and belief. TITLE <u>TECH MGR - AS</u>	SET ADMIN. DATE 9/13/9	4
TYPE OR PRINT NAME A. J. DURRAN	4		TELEPHONE NO. 713/5	44-3797
(This space for State Use)			SEP 2	2 0 1994

TITLE _____

_____DATE_